

CSBE Personal Net Worth Affidavit

Please provide net worth information for each owner by completing the appropriate sections as requested below in order for this Department to determine whether your firm is eligible for participation in the Community Small Business Enterprise (CSBE).

(Personal Net Worth is Total Assets minus Total Liabilities).

After completing the form, *please sign, notarize* and return to the Department of Small Business Development (SBD), Certification Unit at 111 N.W. 1st Street, 19th Floor, Miami, Florida 33128. Please contact the Certification Division at (305) 375-3111 should you have any questions.

Firm name: _____

Section 1	Section 2	Section 3	Section 4
<u>Owner's Name</u>	<u>Ownership %</u>	<u>Qualifier</u>	<u>Personal Net Worth</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

AFFIDAVIT

I swear that the forgoing statements are true and correct and include all the information necessary to determine Personal Net Worth (PNW) of the firm's owner(s).

Further, I understand that the Department of Small Business Development reserves the right to conduct investigations and request additional information necessary to verify the statements and information provided.

Signature of Affiant: _____

Printed Name of Affiant: _____

Title: _____

Sworn to and subscribed before me this _____ day of _____, 2009

Notary Public: _____

My Commission expires on: _____